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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/059,872	01/29/2002	Aleksander Szlam	INVE13US1

006980
TROUTMAN SANDERS LLP
BANK OF AMERICA PLAZA, SUITE 5200
600 PEACHTREE STREET, NE
ATLANTA, GA 30308-2216



CONFIRMATION NO. 7700

FORMALITIES LETTER



OC000000007576842

Date Mailed: 03/04/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$444.
 - \$108 for 6 total claims over 20.
 - \$336 for 4 independent claims over 3.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 1314.

A copy of this notice MUST be returned with the reply.

Ahmad

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

08/09/2002 MBERHE 00000076 10059872

01 FC:101	740.00 OP
02 FC:105	130.00 OP
03 FC:103	108.00 OP
04 FC:102	336.00 OP

Please type a plus sign(+) inside the

+

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OBM 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 10/059872

Filing Date 01/29/2002

First Named Inventor Aleksander Szlam

Group Art Unit 2664

Examiner Name

Total Number of Pages in This Submission 4

Attorney Docket Number INVE13US1

ORIGINAL FILED

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard; Notice to File Missing Parts
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Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT


Firm or Individual name	Charles L. Warner II, Reg. No. 32320		
Signature	<i>Charles L. Warner</i>		
Date	8/2/02		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 8/2/02

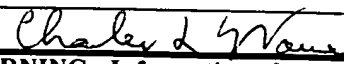
Typed or printed name	Charles L. Warner		
Signature	<i>Charles L. Warner</i>	Date	8/2/02

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

	FEE TRANSMITTAL for FY 2002		Complete if Known	
	Patent fees are subject to annual revision		Application Number	10/059872
			Filing Date	01/29/2002
			First Named Inventor	Aleksander Szlam
			Examiner Name	
			Group Art Unit	2664
TOTAL AMOUNT OF PAYMENT			Attorney Docket No.	INVE13US1

ORIGINAL FILED

METHOD OF PAYMENT				FEE CALCULATION (continued)			
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:				3. ADDITIONAL FEES			
Deposit Account Number: 20-1507							
Deposit Account Name: TROUTMAN SANDERS LLP							
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17							
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27							
2. <input checked="" type="checkbox"/> Payment Enclosed:							
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other							
1. BASIC FILING FEE							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description		Fee Paid	
101	740	201	370	Utility filing fee		740	
106	330	206	165	Design filing fee			
107	510	207	255	Plant filing fee			
108	740	208	370	Reissue filing fee			
114	160	214	80	Provisional filing fee			
SUBTOTAL (1)				(\$)		740	
2. EXTRA CLAIM FEES							
Extra Claims				Fee from below		Fee Paid	
Total Claims	26	- 20** =	6	X	\$18	=	\$108
Independent Claims	7	- 3** =	4	X	\$84	=	\$336
Multiple Dependent						=	
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description		Fee Paid	
103	18	203	9	Claims in excess of 20			
102	84	202	42	Independent claims in excess of 3			
104	280	204	140	Multiple dependent claim, if not paid			
109	84	209	42	** Reissue independent claims over original patent			
110	18	210	9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2)				(\$)		444	
Other fee (specify)							
SUBTOTAL (3)				(\$)		1050	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Charles L. Warner	Registration. No.	52320
		(Attorney/Agent)	
Signature		Telephone	404-885-3275
		Date	August 2, 2002